AMA Queensland Response to the Review of Organ and Tissue Donation Procedures Select Committee



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AMA Queensland is supportive of community, State and Federal Government initiatives to improve organ donation rates, which lead to considerable benefits in quality of life for many Queenslanders on the over-burdened transplant waiting list.

AMA Queensland welcomes the opportunity to submit comment to the Review of Organ and Tissue Donation Procedures Select Committee. The Association applauds the Queensland Premier's initiative to engage with stakeholders in order to consider the alternatives to our current organ and tissue donation system, which could potentially place Queensland as the pioneer of a presumed consent model of organ and tissue donation system in Australia.

Presumed Consent

AMA Queensland supports in principle the introduction of a presumed consent or 'opt-out' system for organ and tissue donation in Queensland, and believes there is a sufficient body of evidence that links a presumed consent or 'opt-out' system, with improved organ donation rates in the long-term, and improved outcomes for patients on transplant waiting lists. However, there is also credible evidence-based research that shows a presumed consent organ donation system does not automatically guarantee higher donation rates than an 'opt-in' system.¹

Educational efforts devoted to promoting a positive attitude towards donation in the general population and the training of health professionals involved in the organ donation are key factors that may reduce organ donation shortage.² AMA Queensland believes there needs to be greater consideration of the additional factors which influence organ donation rates.

Three of these additional factors are: family consultation, positive social atmosphere and the role of the medical profession.

Family consultation

Legislatively, the Spain model is a 'soft' presumed organ donation system, where family consent is always requested and the wishes of the relatives are always respected. Therefore increases in organ donation cannot necessarily be completely attributed to an organ donation opt-out system.³ In Spain, family refusal rates over recent years have remained stable between 20 and 25 per cent, indicating the importance of family participation.⁴

Studies also indicate that in most cases in which the family is unaware of the patient's wishes to donate, the family members decline donation as they view the notion of organ donation as a

¹ Coppen et al, 2005. Opting-out systems: no guarantee for higher donation rates. *Transplant International*. European Society for Organ Transplantation.

² Martinez JM, 2001. Organ Donation in family decision-making within the Spanish donation system. Social Science & Medicine.

³ Matesanz R, 2004. Factors That Influence the Development of an Organ Donation Program.

Transplantation Proceedings.

⁴ Martinez JM, 2001. Organ Donation in family decision-making within the Spanish donation system.

Social Science & Medicine.

'sacrifice' rather than the 'gift of life'.⁵ AMA Queensland believes that through education and guidance, people can be encouraged to talk with their family and friends, to make them aware of their wishes to register, and why they see it as the right decision. In most cases, people who choose to register for organ donation are very willing to communicate their decision.⁶

AMA Queensland submits that any form of a presumed consent system should fall in line with the Spain model, and provide ample consultation with the deceased person's family, with this family consultation requirement to be enacted in legislation.

Positive Social Atmosphere

Dr Rafael Matesanz who developed the 'Spanish Model' of the presumed consent organ donation system, has attributed the success in improved organ donation rates not to the 'optout' method of organ donation, rather to:⁷

- A proactive donor detection program performed by transplant coordinators;
- Systematic death audits in hospitals;
- Positive social atmosphere:
- Adequate management of mass media relations; and
- Adequate economic reimbursement for the hospitals that contributed to this success.

AMA Queensland advocates for a positive social atmosphere towards organ donation through improved consultation from Queenslanders on their decision to 'op-out' of organ donation, as well as a high degree of support and consultation for families of persons deceased. This can be achieved through the increased resources and greater levels of collaboration with the health profession.

Medical Practitioners as advocates for Organ Donation

Medical practitioners are among the most trusted professionals in Australia. The community looks to its health professionals not only for health services and care but also for leadership in promoting healthful practices and advocacy in improving the health and well being of the community. AMA Queensland believes medical practitioners have the unique opportunity to improve public awareness and patient confidence in understanding the benefits of organ donation, not just for individual patients needing organ donations, but also for the community as a whole.

AMA Queensland advocates for strong and increased awareness of organ donation within the medical profession. Doctors can play a vital role in helping patients understand organ donation; as studies show, with the right support, there is an increase in patient confidence which is reflected by the increase in donor numbers. By supporting organ donation doctors become a living example that organ donation is for everyone.

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⁵ Sque M et al, 2008. Why relatives do not donate organs for transplants: 'sacrifice' or 'gift of life'? Journal of Advanced Nursing.

⁶ Dillon B et al, 2007. Willingness to Communicate Organ Donation Intention. Public Health Nursing.
⁷ Matesanz R, 2002. Factors influencing the adaptation of the Spanish Model of organ donation. Transplantation International.

⁸ D'Alessandro et al, 2008. Increasing Organ Donations After Cardiac Death by Increasing DCD Support Among Health Care Professionals: A Case Report. *American Journal of Transplantation*.